

COSHH Risk Assessment Standard Operating Procedure

Date	Version
April 2019	2.2

Purpose

To provide clear instructions on how to undertake a COSHH risk assessment

Who should read this document?

All persons who are involved in the handling, storage or use of substances hazardous to health. This SOP must be read in conjunction with the Control of Substances Hazardous to Health (COSHH) Policy.

Key messages

- The use of substances hazardous to health in the form in which it occurs in the work activity can cause disease or illness
- All Managers are responsible for ensuring that there are COSHH inventories and COSHH Risk Assessments for all substances and work activities carried out within their place of work and that information instruction and training has been given to all relevant staff
- Where necessary Managers must obtain advice from the Health & Safety Team or Site Services where there is the requirement for local exhaust ventilation (LEVs), or where workplace exposure monitoring and health surveillance are identified as requirements in the COSHH risk assessment
- All staff must follow safe systems of work which have been designed to eliminate the risks and reduce the level of harm
- All staff are responsible for their own health and safety and that of others
- All staff must be aware of emergency and spillage procedures for the tasks undertaken
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Accountabilities

Production	Health & Safety Advisor
Review and approval	Health & Safety Committee
Ratification	Director of Corporate Services
Dissemination	Health & Safety Team
Compliance	Health & Safety Committee

Links to other policies and procedures

Health and Safety Policy
 Risk Management Policy
 COSHH Policy
 Fire Safety and Arson Prevention Policy
 Dangerous Substances and Explosive Atmosphere Regulations 2002 Risk Assessment SOP
 Prevention of Contamination Incidents SOP
 Management of Contamination Incidents SOP
 Guidelines for the Safe Employment of Contractors
 Policy and Procedures for the Safe Handling Management and Disposal of Hospital Waste
 Policy for the Safe Administration of Intrathecal Cytotoxic Drugs
 New and Expectant Mothers Risk Assessment
 Incident Management Policy
 Pharmacy Technical Services Cytotoxic Spillages in Isolator Cabinets
 Moving and Handling People and Objects Policy

Version History

V1.0	January 2013	Document created and approved
V2.0	February 2016	Review period extended by 6 months to July 2016
V2.1	September 2016	Review and agreed at the Health and Safety Committee
V2.2	April 2019	Review with Minor Amendments
Last Approval		Due for Review
May 2019		May 2022

The Trust is committed to creating a fully inclusive and accessible service. By making equality and diversity an integral part of the business, it will enable us to enhance the services we deliver and better meet the needs of patients and staff. We will treat people with dignity and respect, promote equality and diversity and eliminate all forms of discrimination, regardless of (but not limited to) age, disability, gender reassignment, race, religion or belief, sex, sexual orientation, marriage/civil partnership and pregnancy/maternity.

An electronic version of this document is available on the Trust Documents Network Share Folder (G:\TrustDocuments). Larger text, Braille and Audio versions can be made available upon request.

Standard Operating Procedures are designed to promote consistency in delivery, to the required quality standards, across the Trust. They should be regarded as a key element of the training provision for staff to help them to deliver their roles and responsibilities.

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How to carry out a COSHH Risk Assessment

What You Need to Know - If you require any assistance please call the Health & Safety Team on [ext.39736/39072](tel:0175239736)

Identify the hazards

Identify which substances are harmful by reading the product labels and safety data sheets (SDS) and consider;

Examples and hazards found in a healthcare environment may include:

- Disinfectants
- Certain pharmaceutical agents, where there is a risk to those administering or disposing of the agent (e.g. cytotoxic drugs)
- Medical gases (potential asphyxiates)
- Biological agents (e.g. bacteria, viruses) and the samples containing them
- Blood and other bodily fluids
- Latex
- Dust of any kind
- Other examples such as cleaning materials, photocopier toner, paint, wood dust, fuel, etc.
- Continued use of non-safe needles or other sharps devices AND/OR Inappropriate use and disposal of sharps

Decide who might be harmed and how

How might workers be exposed? Think about the route into the body (whether the substance can be breathed in, get onto or through the skin or can even be swallowed) and the effects of exposure by each of these routes
Think of how often people work with the substance and for how long
Think about anyone else who could be exposed
Don't forget maintenance workers, contractors and other visitors or members of the public who could be exposed
Also think about people who could be exposed accidentally, e.g. while cleaning, or what happens if controls fail

Evaluate the risks and decide on precautions

Once you have carried out a risk assessment and identified which harmful substances are present, and how workers can be harmed whilst working with the substance, you need to think about preventing exposure.
Do you really need to use a particular substance, or is a safer alternative available?
Can you change the process to eliminate its use or avoid producing it? If this is not possible, you must put in place adequate control measures to reduce exposure
PPE is equipment that can protect the user against hazardous substances. It could include items such as safety gloves, eye protection, aprons, safety footwear and includes respiratory protective equipment (RPE). Remember, **PPE** will not eliminate a hazard, but rather it is the **last line of defence**

Changing the process to remove or reduce risks

Consider whether you can change the process you use to reduce the risk of exposure. For example, you could reduce the temperature of a process to reduce the amount of vapour getting into the air or use pellets instead of powders as they are less dusty
Substitute traditional, unprotected medical sharps with a 'safer sharp' where it reasonably practicable to do so

Containment & removal

Enclose the process or activity as much as possible to minimise the escape or release of the harmful substance
Use closed transfer and handling systems and minimise handling of materials
Extract emissions of the substance near the source
Maintain LEV systems or other mechanical systems designed to remove hazardous substances from the work area, and therefore maintained in an efficient state, working order and in good repair.
Substances to be stored appropriately in accordance with the safety data sheets (SDS) instruction. NB In addition it is essential that a Dangerous Substances and Explosive Atmospheres Regulations 2002 (DSEAR) RISK ASSESSMENT is completed – see the Workplace Fire Safety Checklist in the Fire Safety folder on Trust Documents
Hazardous substances can require work exposure monitoring at regular intervals (EH40), and therefore Heads of Department must contact the Site Services Team to make suitable arrangements

Systems of work

Restrict access to those people who need to be there
Plan the storage of materials, and use appropriate containers. Check that storage containers are correctly labelled and that incompatible materials, for example acids and caustics, are separated
Plan the storage and disposal of waste
Produce a standard operating procedure, including information instruction and training

Spillages & cleaning

Exposure to hazardous substances can occur during cleaning, so plan and organise the workplace so that it can be easily and effectively cleaned i.e. smooth work surfaces will allow easy cleaning
Have the right equipment and procedures to clear up emergency spillages quickly and safely
Clean regularly using a 'dust-free' method – vacuum, don't sweep
Dispose of waste in line with the safety data sheets (SDS) instruction

COSHH Risk Assessment Standard Operating Procedure (SOP)

1 Purpose and Scope

Introduction and Identification of Substances

COSHH covers any substance or preparation (i.e. mixture of two or more substances) used at work, or arising from work activities, which is harmful to human health in the form in which it occurs in the work activity. Consideration should also be given to DSEAR Regulations.

Substances may be a solid, liquid, dust, fume, vapour, gas or micro-organism, and will have the potential to cause harm by:-

- Inhalation
- Ingestion
- Absorption
- Inoculation

EH40/2005 Workplace exposure limits (WELs) are British Occupational exposure limits and are set in order to help protect the health of workers. WELs are concentrations of hazardous substances in the air averaged over a specific period of time and must be included in the COSHH risk assessment process.

Examples and hazards found in a healthcare environment may include:

- Disinfectants
- Certain pharmaceutical agents, where there is a risk to those administering or disposing of the agent (e.g. cytotoxic drugs)
- Medical gases (potential asphyxiates)
- Biological agents (e.g. bacteria, viruses) and the samples containing them
- Blood and other bodily fluids
- Latex
- Dust of any kind
- Other examples such as cleaning materials, photocopier toner, paint, wood dust, fuel, etc.

AND

- Continued use of non-safe needles or other sharps devices
- Inappropriate use and disposal of sharps

Risk assessments must contain sufficient detail on the preventative and protective measures to be taken to control the risks, including a suitable and sufficient risk assessment around the use of non-safe sharps in areas where it is not reasonably practicable to do so

Health and Safety (Sharps Instruments in Healthcare) Regulations 2013

Hazardous Example – Cytotoxic Drugs

All hazardous drugs are potentially hazardous and must be handled with respect. Many are known to be carcinogenic (cause cancer), teratogenic (cause birth defects) and may also cause local irritation on skin or eye contact

All staff must be aware as to which drugs are cytotoxic and where these drugs are stored, transported and handled, including the disposal of cytotoxic waste

All staff must also be familiar with emergency procedures and with the locations and contents of the cytotoxic drug spillage kits – listed in Appendix 9

Note: that there is a separate procedure for dealing with cytotoxic spillages within the isolator cabinets which must be followed

High Risk Chemical Example – Formalin

Formaldehyde is a gas at room temperature. It is colourless, and has a characteristic pungent irritating odour. Solutions of formaldehyde in water, commonly called formalin, are used as disinfectants and for preservation of biological specimens

Exposure to formaldehyde is a significant consideration for human health, and is known to be a human carcinogen. Example formalin emergency procedure is referred to in Appendix 8

Definitions

See COSHH Policy

Regulatory background

See COSHH Policy

Key Duties

See COSHH Policy

Monitoring and assurance

See COSHH Policy

2 Procedure to Follow – in the preparation of a COSHH risk assessment

2.1 Information Instruction and Training

The HSE has issued guidance on working with substances hazardous to health. This guidance is known as the Eight Steps, and can be located in Appendix 2. COSHH risk assessment handling and disposal guidance steps can be located in Appendix 11. Further information is available on the HSE website which has been linked to the Health & Safety Staffnet page. Advice can be sourced from the Health & Safety Team. Advisor Contact details are contained in Appendix 4

2.2 Purchase of substances

All substances must be ordered through the Trust Procurement System. A material safety data sheet must be delivered with the substance. The up to date MSDS should be utilised as the properties of the product may have changed. An example data sheet is shown in Appendix 1. Specific guidance on transportation and delivery of substances is contained within the Control of Substances Hazardous to Health (COSHH) Policy

At this time it is important that consideration should be given to the availability of a less hazardous substance, such as safe needles or other sharp devices

2.3 Product Identification, labelling and storage

All products containing a hazard symbol are potentially hazardous to health. Therefore it is necessary to look for the hazard symbols on the packaging and also note the essential storage requirements as referred to in the material safety data sheet. **It cannot be over emphasised the importance of thoroughly reading the material safety data sheet as this document provides ALL relevant product information.** See Appendix 3. It is important that the product remain in its original packaging and is stored safely in an appropriately labelled hazardous substance cabinet (COSHH cabinet). Advice can be sourced from the Health & Safety Team

2.4 Completion of Inventory of Substances and COSHH Related Activities

All products with a hazard symbol must be entered on to the Inventory for the Department or Ward. The completed COSHH inventory must be placed in the green Health & Safety/COSHH folder (Appendix 5). The inventory is shown in Appendix 6

You must also consider any work activities where you may be at risk of harm. As an example you may be working with a patient with a known blood borne virus and additional precautions may be required for your own safety. There will be clinical guidance for all such identified activities

2.5 COSHH Co-ordinator.

A COSHH Co-ordinator will be the competent person who has sufficient training, experience, or knowledge and other qualities that allow them to identify the hazards associated with a particular product or task. The level of competence required will depend on the complexity of, and the hazards associated with a particular situation. Advice can be sourced from the Health & Safety Team

2.6 COSHH Risk Assessment

The named COSHH Co-ordinator, or other competent person, will undertake the COSHH Risk Assessment. This must be recorded on the COSHH Risk Assessment form – shown in Appendix 7

During the risk assessment process a hierarchy of control must be put in place. The hierarchy of hazard control is a system used to minimise or eliminate exposure to the hazards. Consideration must also be given to the volume of a spillage and the adequacy of the emergency spillage kit to deal with any such emergency

In addition to this it may be necessary to obtain specialist advice where, for example, air monitoring or health surveillance is referred to in the material safety data sheet, or in the EH40. Refer to the Control of Substances Hazardous to Health (COSHH) Policy for specific details. Advice can also be sourced from the Health & Safety Team or Site Services

2.7 Personal Protective Equipment (PPE)

PPE must be provided and correctly used where it is referred to as a requirement in the material safety data sheet and/or COSHH Risk Assessment/SOP. This PPE must be suitable and sufficient, and where necessary FIT testing must also be provided to staff. Remember that PPE is always a last resort after all other controls have been put in place. Advice can be sourced from the Health & Safety Team

2.8 Emergency Spillage and First Aid Arrangements

Emergency arrangements must be specific for each product or task and must be prominently displayed for hazardous substances such as cytotoxic substances and for use of formalin. It is important that all staff working in the location must be given information, instruction and training on emergency spillage including drills, and arrangements for first aid. It is important that consideration must be given to the volume of a spillage and the adequacy of the spillage kit to deal with any such emergency. See Appendix 10

3 Document Ratification Process

The design and process of review and revision of this procedural document will comply with The Development and Management of Trust Wide Documents.

The review period for this document is set as default of three years from the date it was last ratified, or earlier if developments within or external to the Trust indicate the need for a significant revision to the procedures described.

This document will be approved by the Health & Safety Committee and ratified by the Director of Corporate Business

Non-significant amendments to this document may be made, under delegated authority from the Director of Corporate Business, by the nominated author. These must be ratified by the Director of Corporate Business and should be reported, retrospectively, to the Health & Safety Committee

Significant reviews and revisions to this document will include a consultation with named groups, or grades across the Trust. For non-significant amendments, informal consultation will be restricted to named groups, or grades who are directly affected by the proposed changes

4 Dissemination and Implementation

Following approval and ratification, this procedural document will be published in the Trust's formal documents library and all staff will be notified through the Trust's normal notification process, currently the 'Vital Signs' electronic newsletter.

Document control arrangements will be in accordance with The Development and Management of Trust Wide Documents.

The document author(s) will be responsible for agreeing the training requirements associated with the newly ratified document with the Director of Corporate Business and for working with the Trust's training function, if required, to arrange for the required training to be delivered.

5 Reference Material

See COSHH Policy for references



SAFETY DATA SHEET

SANI-CLOTH 70 Biocide

Section 1 – Identification of the Substance/Preparation and of the Company/Undertaking

Product: Sani-Cloth 70 Biocide
Type: Biocidal product
Use: Hard surface disinfectant wipes.
Professional use only

Ref: ID 4043X: XP00284 and XP00285

Company: PDI
Aber Road
Flint
UK
CH6 5EX

Tel: +44(0)1352 736700
Fax: +44(0)1352 736701

Compiled by: reg@nice-pak.co.uk

Emergency No: +44(0)1352 736700 (UK office hours only)

Packaging:

Type: Canister
Size: 100mm diameter, 240mm high
Label: Red and black text on white background
Description: White canister, red lid and coloured label
Other: N/A

Eight Steps to Risk Assessment		Appendix 2
Step 1	Assess the risks	Assess the risks to health from hazardous substances used in or created by your workplace activities
Step 2	Decide what precautions are needed	You must not carry out work which could expose your employees to hazardous substances without first considering the risks
Step 3	Prevent or adequately control exposure	You must prevent your employees being exposed to hazardous substances. Where preventing exposure is not reasonably practicable, then you must adequately control it. The advice in the COSHH Policy, and other guidance will help you to make correct assessments and to put the appropriate controls in place
Step 4	Ensure that control measures are used and maintained	Ensure that control measures are used and maintained properly, and that safety procedures are followed
Step 5	Monitor the exposure	Monitor the exposure of employees to hazardous substances, if necessary
Step 6	Carry out appropriate health surveillance	Carry out appropriate health surveillance where your assessment has shown this is necessary, or where COSHH sets specific requirements
Step 7	Prepare plans and procedures to deal with accidents, incidents and emergencies	Prepare plans and procedures to deal with accidents and emergencies involving hazardous substances, where necessary
Step 8	Ensure employees are properly informed, trained and supervised	You should provide your employees with suitable and sufficient information, instruction and training.

Hazard Symbols

Appendix 3

	Explosive	(Symbol: Exploding Bomb)
	Flammable	(Symbol: Flame)
	Oxidising	(Symbol: flame over circle)
	Corrosive	(Symbol: Explosion)
	Acute Toxicity	(Symbol: Skull & Crossbones)
	Hazardous to the Environment	(Symbol: Dead tree and fish)
	Health Hazard / Hazardous to the ozone layer	(Symbol: Exclamation mark)
	Serious Health Hazard	(Symbol: Health Hazard)

General Health & Safety	Health & Safety Team	39736
Splash or other contamination injury to staff	Staff Health & Wellbeing	37232
Infection / contamination	Infection Prevention & Control	32115
Formalin spillage (out of hours)	Main Laboratory (On-call biomedical scientist via switchboard)	52362
Major spillage	Fire Advisor / Fire Service	31299
Explosive substances	Fire Safety Manager	31299
Cytotoxic Drugs	Pharmacy Department	37457
Medical Gases – piped	Site Services	31300
Medical Gases – cylinders	Pharmacy Department	37457
Machinery / Equipment	MEMS	31333
Mercury	Greg Hamley – MEMS	53579
Waste	Andrew Davies – Site Services	39738

COSHH FOLDER CONTENTS

Once the Inventory has been completed it is necessary for every Department to maintain a COSHH folder for all staff to be aware of its location. The contents of the folder must contain the following information, and the folder and its contents must be available for inspection AT ALL TIMES

Contents

- this COSHH Procedure
- completed inventory of substances used in the department – see Appendix 5
- completed COSHH Risk Assessments – see Appendix 6
- (where applicable) a material safety data sheet for each hazardous substance used within the Department
- Standard Operating Procedure for each COSHH procedure / process
- SHWB Flowchart – “What do I do in the Event of a Contamination Incident” (See Management of Contamination Incidents SOP)
- Spillage of Hazardous Substances / Emergency Procedures (relevant to all substances utilised in the area)
- completed signed Register of competent persons, including training records

Department / Unit Location

Date of Inventory Inventory Compiled by

SUBSTANCES Service/Department COSHH Co-ordinator

Ref No.	Name of Substance (please indicate synonyms if known)	Supplier details (please include address & telephone no.)	Hazard / Risk classification labeling, i.e. Irritant, toxic etc	Area of storage and approx quantities	End use/s and area used in	Risk Assessment location	Review Date of Risk Assessment	DATIX Risk Rating
01	FORMALDEHYDE, 4% (v/v) example	Company's Name: REAGENTS	 formalin 4%.pdf (62 KB)	Formalin room 1 litre Door number 35/22	Formalin room Door number 35/22	Main Office	15/10/2013	
02	MITOMYCIN -C example	Company's Name ScienceLab.com	 meds mitomycin c.pdf (51 KB)	Ward Fridge	Ward Bay	Main Office	t.b.a.	

WORK ACTIVITY

Substance in use	Activity	Control Measures including PPE

Substance name:			
Reference Number:			
Work Activity			
Comments			
Supplier/Manufacturer		Area of use	
Product Code		Storage required	
Maximum quantity in use		Duration of exposure	
Maximum quantity in storage		Duration of exposure	
Is substance decanted?		Frequency of Exposure	
Size of second container		Data sheet attached	
Completed by (name of competent person/COSHH Key Worker)			
Date of Completion			
Date of Review			
Hazard Identification			
Priority Group (delete those not relevant)			
1 High Risk Extensive Controls	2 Moderate Risk Low to moderate exposure	3 Low Risk, or No hazard identified	

Category of Danger (from SDS & EH40)										delete those that do not apply
Very toxic	Toxic	Risk to Reproduction	Harmful	Corrosive	Irritant	Sensitising	Carcinogen	Mutagenic	Bio-hazard	
										
										
Flammable	Highly Flammable	Explosive	Danger to Environment	Radioactive	Oxidising					
										
										
Workplace Exposure Limits (WELS)										
Ingredients (chemical name)	Hazard(s) associated with ingredient				8 hour TWA ppm mg/m ³		STEL 15 mins Ppm mg/m ³			
EXPOSURE ROUTES			YES/NO	FIRST AID MEASURES (if known)						
Inhalation										
Skin contact										
Eye contact										
Ingestion										
Inoculation										
Alternative substance available				Alternative substance and reasons for not using						
THE WORK ACTIVITY AND CURRENT CONTROL MEASURES										

	YES/NO	DESCRIPTION DETAILS
Written safe system of work available		<i>(Please attach a copy to the CRA and place in COSHH folder)</i>
Record of Information / instruction / training given		
Local ventilation		
Fume cupboard		
Exposure monitoring		
Health surveillance		
Appropriate PPE: Gloves, Lab Coat, Safety goggles, Respiratory protection, etc		
Appropriate warning signs or labels		
Spillage procedure		
Disposal procedure		
Other		

Toxicity

Substance	
Alternative substance available	
Alternative substance and reasons for not using	
Is a less hazardous substance available?	YES / NO

Example 10% Formalin Risk Assessment



Formalin 10%
concentration ris.

MINOR SPILLAGE OF FORMALIN < 10 mls

Use disposable wipes and wash down the contaminated area with water. These wipes must be rinsed in cold running water before placing in a yellow bag

Dry the area with fresh wipes before recommending work

Ensure that you are wearing gloves before carrying out this activity. If you experience any discomfort you must not persist with clearing up the spillage but evacuate the area immediately and contact a senior member of staff

MODERATE SPILLAGE OF FORMALIN >10 mls but <500 mls

Evacuate the working area immediately and Shut all doors behind you

Place the spillage sign outside the door and contact a senior member of staff

The senior member of staff will assess the risk and take the appropriate action necessary

If necessary contact Labs on 52362. Out of hours contact on-call biomedical scientist via the switchboard.

Action by a senior member of staff

Put on respiratory protection and gloves

Contain the spillage using the formalin Control Granules, and then sprinkle an even layer of these granules over the spillage

Evacuate the room and leave for 10 minutes for the granules to work, they will react with the formalin to produce a slurry

After sufficient time has elapsed, it is safe to clear up the spillage. Using the scoop provided, sweep the slurry into a plastic container. This container must be labelled as an absorbed formalin spillage.

IT IS NOT CLINICAL WASTE AND AS SUCH MUST NOT BE SENT FOR INCINERATION

The formalin level should then be measured using the portable formaldehyde meter. It must be below 2ppm before the area can be used

Do not attend the spillage unless you are wearing and are trained in the use of the appropriate respiratory protection **The full face mask will give protection up to 1000 ppm formalin. The powered respirator gives a protection factor of up to 100 ppm**

Do not remove the PPE unless the formalin reading is less than 2 ppm

MAJOR SPILLAGE OF FORMALIN >500 mls

This may require the attention of the Fire Brigade (who have self-contained suits and breathing apparatus which enables them to work in areas of very high concentrations). The extent and the site of the spillage will determine the need to call them. This will need to be assessed by the senior member of staff attending the spillage. **If a senior member of the technical staff is unavailable you must call the fire brigade.**

Switchboard to contact the Fire Brigade to report a Formalin spill. Strength, approximate volume, and the precise location of the spill to be provided when making the call

LOCATION OF NEAREST SPILLAGE KIT

EMERGENCY CONTACT NUMBER(S)

REFER TO WASTE POLICY AND PROCEDURES FOR DISPOSAL OF WASTE

Section 1 - Action in the event of spillage

DO NOT leave the spillage unattended in order to obtain assistance, call for help if necessary. Keep all unnecessary personnel away from the site of the spillage

Obtain the nearest Chemo safety cytotoxic drug spillage kit

Follow the instructions given in the kit

For powder spills lay the Chemosorb pad over the spill and carefully pour water onto this in order to dissolve the powders. Then proceed as per instructions

The final chemotherapy waste bag must be labelled with a cytotoxic warning diamond label and the code UN1851. This must then be placed in the haul waste cytotoxic waste skip following procedures

Complete the report card and pass to the Pharmacy Quality Assurance Manager

If any member of staff involved feels unwell then they must be referred to the SHWB Department for assessment

Section 2 - Contents of Chemo safety Spillage Kit

Instructions for use on a card	Nitrile gloves (2 pairs)
Respirator mask	Safety Glasses
Chemoplus Gown	Shoe covering
Spill sign	Chemosorb Pads
Spill Towels	Poly Bags

Location of Chemo safety Spillage Kits

Main store on cytotoxic drug storage shelves

Cold store on cytotoxic drugs storage shelves

Technical Services Department on cytotoxic drug storage shelves

Quality Control Laboratory on H1 cupboard

Research laboratory above the sink

All Wards / other areas where chemotherapy treatment is provided

Further Information may be obtained from the Pharmacy Department

Further information relating to Waste may be obtained from the Waste Policy and Procedures

EYES Irrigate thoroughly with water for at least 15 minutes

Obtain medical attention

LUNGS - Move from place of exposure into the fresh air, rest and keep warm.

If symptoms persist obtain medical advice

SKIN - Wash off skin thoroughly with water. Remove contaminated clothing and wash before re-use.

In severe cases obtain medical attention

MOUTH - Wash out mouth thoroughly with water and give 200 mls of warm water to drink. Do not induce vomiting

OBTAIN MEDICAL ATTENTION (as detailed in COSHH Risk Assessment for the substance/activity held centrally in the Department COSHH folder)

If in doubt refer to Departmental COSHH folder for materials safety data sheet and COSHH Risk Assessment

<p>PURCHASE OF SUBSTANCES</p>	<p>Ensure that a material safety data sheet (MSDS) / CRA is delivered with the substance ordered. All substances must be ordered through the Trust Procurement system. Consider the availability of safer products (including safer sharps). Utilise up to date MSDS as it may contain updated product information</p>
<p>DELIVERY OF SUBSTANCE And TRANSPORT TO WARDS AND PATIENTS' HOMES</p> <p>NOTE: Pregnant staff must never handle cytotoxics</p>	<p>Porters and Drivers must be aware of potential hazards, have read and understood relevant procedures and COSHH Risk Assessment, and have received practical training and emergency drills in COSHH / cytotoxic drug spillage procedure</p> <p>Staff must be trained in the safe use, storage and transportation of substances</p> <p>Relevant staff must be trained in the use of PPE / masks / closed systems / protective clothing</p> <p>Staff working in the location must be trained on emergency / spillage arrangements including emergency spillage drills</p>
<p>STORAGE OF SUBSTANCES</p>	<p>Substances hazardous to health must be kept in the appropriate storage cabinets provided</p> <p>Staff must be trained in the safe use, storage and transportation of substances</p> <p>Relevant staff must be trained in the use of PPE / masks / closed systems / protective clothing</p> <p>In locations where formalin is prepared or cytotoxic drugs are administered, there MUST be a spills kit available for immediate use which must be commensurate with the likely spillage</p> <p>Staff working in the location must be trained on emergency / spillage arrangements including emergency spillage drills</p> <p>Substances must be stored in appropriate containers in accordance with COSHH risk assessment storage instructions, in appropriately ventilated locations, and taking into account specific requirements of other substances stored in the same location. (DSEAR) Staff must be aware of potential hazards, have read and understood relevant COSHH Risk Assessment and have received practical training in COSHH substances, in particular cytotoxic drug spillage procedure (including emergency drills)</p>
<p>PREPARATION OF CYTOTOXIC DRUGS (Pharmacy only)</p>  	<p>Only to be prepared in designated isolation cabinet in Pharmacy by competent, trained staff following procedures provided by Pharmacy Department</p> <p>Cytotoxic drugs to be over-wrapped in a sealed PVC bag AND placed into a sealed polypropylene container marked "Cytotoxic" bearing "toxic symbol" – shown in margin</p> <ul style="list-style-type: none"> ○ Staff must be trained in the safe use, storage and transportation of substances ○ Relevant staff must be trained in the use of PPE / masks / protective clothing ○ In locations where formalin is prepared or cytotoxic drugs are administered, there MUST be a spills kit available for immediate use which must be commensurate with the likely spillage ○ Staff working in the location must be trained on emergency/spillage arrangements and have undertaken emergency spillage drills
<p>RECEIPT OF AND STORAGE OF SUBSTANCE</p> <p>NOTE: Pregnant staff must never handle cytotoxics</p>	<p>Obtain Material Safety Data Sheets and prepare COSHH Risk Assessment (CRA). (Example CRA is attached to the last page of the CRA)</p> <ul style="list-style-type: none"> ○ Staff must be trained in the safe use, storage and transportation of substances ○ In locations where formalin is prepared or cytotoxic drugs are administered, there MUST be a spills kit available for immediate use ○ Staff working in the location must be trained on emergency / spillage arrangements including emergency spillage drill

	<p>Substances to be stored in appropriate containers in accordance with COSHH risk assessment storage instructions, in appropriately ventilated locations, and taking into account specific requirements of other substances stored in the same location. (DSEAR) Staff must be aware of potential hazards, have read and understood relevant COSHH Risk Assessment and have received practical training in COSHH substances, in particular cytotoxic drug spillage procedure including drills.</p> <p>NB In addition it is essential that a Dangerous Substances and Explosive Atmospheres Regulations 2002 (DSEAR) RISK ASSESSMENT is completed – see the Workplace Fire Safety Checklist in the Fire Safety folder on Trust Documents</p>
<p>PREPARE THE INVENTORY</p>	<p>Before attempting COSHH assessments, Managers must first compile an inventory of all substances that are in use, and work processes where COSHH may be of concern within their areas of responsibility. A copy of the inventory for listing hazarding hazardous substances / processes is shown in Appendix 6. (Please remember the principle that you should consider whether hazardous substances are actually needed, or whether some substances could be replaced with less hazardous substances, or disposed of as they are not required). Also identify required PPE such as goggles, masks etc, for possible splashes, or other contamination such as dust/particles/gases/vapours during clinical procedures Once the inventory is completed, any substances not required should be appropriately disposed of.</p>
<p>UNDERTAKE A COSHH RISK ASSESSMENT</p>	<p>COMPLETE COSHH Risk Assessment for task (to satisfy Regulation 6 Risk Assessment)</p> <p>Having compiled an accurate inventory, Managers must utilise the hierarchy of controls to decide upon the degree of assessment required, i.e. simple - where the process or substance is controlled, OR where the element of risk is greater and further specialist advice is required. It may require to be added to the Trust's Risk Register using DATIX. Please contact the Health & Safety Advisor for advice.</p> <p>COSHH Assessments must be completed by a competent COSHH Assessor for the Department. Risk assessment is not just a paper exercise; it is about taking sensible steps to prevent ill health. Consider how workers are exposed, and to what extent, before deciding if you need to do anything to reduce their exposure.</p> <p>The simple COSHH assessment risk assessment is intended for use with products which, although they may contain potentially hazardous chemicals, do not pose any significant risk to users because of the small quantities held, low rate of usage, or methods applied.</p> <p>When the COSHH risk assessment has identified a hazardous substance which presents a significant risk activity to users, this must be entered as a risk on the DATIX Risk Register</p> <p>By following the step-by-step Guidance Notes within the risk assessment forms, COSHH assessors should arrive at a logical and meaningful conclusion as to the type and degree of control measures required, ensuring the safe use of all hazardous substances</p> <p>CONTROL MEASURES</p> <p>Evaluate the risks and decide on precautions</p> <p>The risk is the likelihood of harm being realized, together with an indication of how serious the harm could be</p> <p>The precautions are control measures put into place to remove a hazard or control a remaining risk from a hazard</p> <p>Having spotted the hazards, you then have to decide what to do about them.</p>

	<p>The Law requires you to do everything 'reasonably practicable' to protect people from harm. You can work this out for yourself, but the easiest way is to compare what you are doing with good practice. Consider what you are already doing, and what controls are in place? Is there more you can do?</p> <p>Can you remove the hazard altogether? If not, how can you control the risks so that harm is unlikely?</p> <p>Apply controls in the following order:</p> <ul style="list-style-type: none"> • Eliminate the hazard. Stop the procedure • Substitute i.e. change use of chemical, or process • Physical separation of person from hazard, e.g. use of cabinet • Use competent trained staff and provide information, instruction and training to undertake the task safely • Record giving of information/instruction/training • Written standard operating procedure • Appropriate warning signs • Appropriate personal protective equipment <ul style="list-style-type: none"> • Relevant staff must be trained in the use of PPE / masks / closed systems / protective clothing • In locations where formalin is prepared, or cytotoxic drugs are administered, there MUST be a suitable and sufficient spills kit available for immediate use prior to such substances being used • Staff must be trained in the safe use, storage and transportation of substances • Where the use of cabinets / containment rooms have been identified, it is essential that staff are given full instruction on how to use the cabinet / room, the correct use of relevant PPE, emergency / spillage arrangements to follow, emergency drills and the location of spillage kits • Staff working in the location must be trained on emergency / spillage arrangements • Emergency spillage arrangements (see Appendices 8 and 9) must be laminated and displayed in relevant areas, e.g. in a formalin or preparation room <p>NB In addition it is essential that a Dangerous Substances and Explosive Atmospheres Regulations 2002 (DSEAR) RISK ASSESSMENT is completed – see the Workplace Fire Safety Checklist in the Fire Safety folder on Trust Documents</p>
<p>INFORMATION INSTRUCTION AND TRAINING</p> <p>NOTE: Pregnant staff must never handle cytotoxics</p>	<ul style="list-style-type: none"> • Use competent trained staff and provide information, instruction and training to undertake the task safely • Record giving of information/instruction/training • Maintain up to date COSHH training information in COSHH folder • Staff must be trained in the safe use, storage and transportation of substances • Relevant staff must be trained in the use of PPE / masks / closed systems / protective clothing • Where the use of cabinets / containment rooms have been identified, it is essential that staff are given full instruction on how to use the cabinet / room, emergency / spillage arrangements to follow, and the location of spillage kits. <p>NB In addition it is essential that a Dangerous Substances and Explosive Atmospheres Regulations 2002 (DSEAR) RISK ASSESSMENT is completed – see the Workplace Fire Safety Checklist in the Fire Safety folder on Trust Documents</p>

<p>SPILLAGE OF HAZARDOUS SUBSTANCES</p> <p>AND</p> <p>EMERGENCY PROCEDURES</p>	<p>Employees or others may be inadvertently exposed to hazardous substances through spillage or leakage. Managers must ensure that appropriate measures are in place to adequately contain and clear the spillage, and make the environment safe whilst doing so. This will usually involve written emergency procedures, procedures for ensuring safe containment of the substance and subsequent disposal.</p> <p>See example guidance for Spillage Procedures contained in Appendices 8 and 9</p> <p>Heads of Department / Ward managers must ensure that all of their staff are familiar with these procedures or measures, and have all appropriate training</p> <p>PPE is usually required to control the exposure of those working in the area of contamination. All other persons should be excluded from the area</p> <p>Where the risks of a substance escaping are significant, or a substance is especially hazardous, local Managers will ensure that emergency arrangements are in place as part of the risk assessment process. Guidance on necessary emergency procedures is normally found on the supplier's Material Safety Data Sheet. This must include arrangements for reporting any incidents as per the Trust's incident reporting policy and arrangements for contacting the emergency services</p> <p>The Staff Health & Wellbeing Flowchart entitled "What do I do in the Event of a Contamination Incident?" (Management of Contamination Incidents SOP) should be adhered to in the event of a contamination incident</p> <p>Where medical gas or any other gas is in use, it is essential that emergency arrangements are identified and that all staff are aware of the procedures to follow in the event of a spillage / leakage</p>
<p>FRONTLINE MANAGEMENT ARRANGEMENTS</p> <p>FOR MAINTENANCE OF MECHANICAL SYSTEMS INCLUDING LOCAL EXHAUST VENTILATION (LEV)</p>	<p>Frontline Management MUST put in place co-ordinated maintenance arrangements for all mechanical systems to satisfy in particular COSHH Regulations; 7 Prevention or Control, 9 Maintenance and 10 Monitoring Exposure i.e. LEV systems or other mechanical systems designed to remove hazardous substances from the work area, and therefore maintained in an efficient state, working order and in good repair.</p> <p>This maintenance service must be arranged by Estates and these arrangements should be formulated into a documented system, with the specification readily accessible, including the scope and scheduling of the maintenance arrangement to be undertaken. The arrangements must include a description of the duties and responsibilities of those involved. This will in addition provide local management teams with the oversight of the maintenance arrangements.</p> <p>These arrangements will also provide local management with a tool which can be used to satisfy their Service line governance structure in the management of the Control of Substances Hazardous to Health Regulations 2002 (as amended).</p>